

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

ADDRESS (number and street)

PO Box 77492 -- Capitol Hill

Check if different
than previously
reported. (ACC)

Washington

DC

20013

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00389882

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Robert D. Kampia

Signature of Treasurer

Electronically Filed by Robert D. Kampia

Date

07

30

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 14

Write or Type Committee Name

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Report Covering the Period: From: M M
0 1 D D
0 1 Y Y Y Y
2 0 0 9 To: M M
0 6 D D
3 0 Y Y Y Y
2 0 0 9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2 0 0 9		22408.57
(b) Cash on Hand at Beginning of Reporting Period	22408.57	
(c) Total Receipts (from Line 19)	17884.76	17884.76
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	40293.33	40293.33
7. Total Disbursements (from Line 31)	11500.00	11500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	28793.33	28793.33
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE **OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	W	Y
0	6	0	3	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	8353.00	8353.00
(ii) Unitemized	9531.76	9531.76
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	17884.76	17884.76
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➤	17884.76	17884.76
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17884.76	17884.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17884.76	17884.76

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11500.00	11500.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11500.00	11500.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11500.00	11500.00	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 14

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	17884.76	17884.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17884.76	17884.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)

Marc Bejarano

Mailing Address 3 Springvale Ave.

City

Chelsea

State

MA

Zip Code

02150

FEC ID number of contributing
federal political committee.

C

Name of Employer
OpenWave Systems, Inc.

Occupation
information technology (IT)

Receipt For: 2009

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.8766

Amount of Each Receipt this Period

50.00

92015967_4000_PAC

B.

Full Name (Last, First, Middle Initial)

Marc Bejarano

Mailing Address 3 Springvale Ave.

City

Chelsea

State

MA

Zip Code

02150

FEC ID number of contributing
federal political committee.

C

Name of Employer
OpenWave Systems, Inc.

Occupation
information technology (IT)

Receipt For: 2009

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.8761

Amount of Each Receipt this Period

50.00

92015967_4000_PAC

C.

Full Name (Last, First, Middle Initial)

Robert D Borchert

Mailing Address PO Box 365

City

Felton

State

CA

Zip Code

95018-0365

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2009

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.8978

Amount of Each Receipt this Period

50.00

78753808_4000_PAC

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)

Robert D Borchert

Mailing Address PO Box 365

City

Felton

State

CA

Zip Code

95018-0365

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.8974

Amount of Each Receipt this Period

50.00

78753808_4000_PAC

B.

Full Name (Last, First, Middle Initial)

James H. Cook

Mailing Address 43 Musconetcong River Rd.

City

Hampton

State

NJ

Zip Code

08827-3021

FEC ID number of contributing
federal political committee.

C

Name of Employer

James H. Cook

Occupation

Public Interest Consultant

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.8714

Amount of Each Receipt this Period

80.00

78500634_4000_PAC

C.

Full Name (Last, First, Middle Initial)

James H. Cook

Mailing Address 43 Musconetcong River Rd.

City

Hampton

State

NJ

Zip Code

08827-3021

FEC ID number of contributing
federal political committee.

C

Name of Employer

James H. Cook

Occupation

Public Interest Consultant

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.8710

Amount of Each Receipt this Period

80.00

78500634_4000_PAC

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 / 14

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)

James H. Cook

Mailing Address 43 Musconetcong River Rd.

City

Hampton

State

NJ

Zip Code

08827-3021

FEC ID number of contributing
federal political committee.

C

Name of Employer
James H. Cook

Occupation

Public Interest Consultant

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	9	

Transaction ID: SA11AI.8708

Amount of Each Receipt this Period

80.00

78500634_4000_PAC

B.

Full Name (Last, First, Middle Initial)

James H. Cook

Mailing Address 43 Musconetcong River Rd.

City

Hampton

State

NJ

Zip Code

08827-3021

FEC ID number of contributing
federal political committee.

C

Name of Employer
James H. Cook

Occupation

Public Interest Consultant

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	9	

Transaction ID: SA11AI.8711

Amount of Each Receipt this Period

80.00

78500634_4000_PAC

C.

Full Name (Last, First, Middle Initial)

Mark E Crosby

Mailing Address 3175 S. Stafford St.

City

Arlington

State

VA

Zip Code

22206-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer
United State Department
of Labor

Occupation

Government

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	9	

Transaction ID: SA11AI.8741

Amount of Each Receipt this Period

1000.00

78718586_5276_PAC

SUBTOTAL of Receipts This Page (optional)

1160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)

John Gilmore

Mailing Address P.O. Box 170608

City

San Francisco

State

CA

Zip Code

94117-0608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Philanthropist

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.8794

Amount of Each Receipt this Period

5000.00

78633946_2064_PAC

B.

Full Name (Last, First, Middle Initial)

Leonard Kody

Mailing Address 10751 S. Harlem #3F

City

Worth

State

IL

Zip Code

60482-1175

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metropolitan Water Rec.

Occupation

Metropolitan Water Rec.

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.8778

Amount of Each Receipt this Period

333.00

20091587_15_PAC

C.

Full Name (Last, First, Middle Initial)

Michael Newman

Mailing Address 27141 Lerma

City

Mission Viejo

State

CA

Zip Code

92691-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Newman Health Services,
Inc.

Occupation

hearing instrument specialist

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.8754

Amount of Each Receipt this Period

50.00

78506615_4000_PAC

SUBTOTAL of Receipts This Page (optional)

5383.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)

Michael Newman

Mailing Address 27141 Lerma

City

Mission Viejo

State

CA

Zip Code

92691-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Newman Health Services,
Inc.

Occupation

hearing instrument specialist

Receipt For: 2009

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	2	/	2	0	9	

Transaction ID: SA11AI.8755

Amount of Each Receipt this Period

50.00

78506615_4000_PAC

B.

Full Name (Last, First, Middle Initial)

Karl Saltzman

Mailing Address 218 Julia St

City

Thibodaux

State

LA

Zip Code

70301-6512

FEC ID number of contributing
federal political committee.

C

Name of Employer
Petroleum Center INC

Occupation

Petroleum Center INC

Receipt For: 2009

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	1	/	2	0	9	

Transaction ID: SA11AI.8793

Amount of Each Receipt this Period

1000.00

20081302_5276_PAC

C.

Full Name (Last, First, Middle Initial)

Robert A. Shinstrom

Mailing Address P.O. Box 2845

City

Arlington

State

WA

Zip Code

98223-0650

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employed

Occupation

locksmith

Receipt For: 2009

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	9	

Transaction ID: SA11AI.8772

Amount of Each Receipt this Period

100.00

150132690_4000_PAC

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)

Robert A. Shinstrom

Mailing Address P.O. Box 2845

City

Arlington

State

WA

Zip Code

98223-0650

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employed

Occupation
locksmith

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.8769

Amount of Each Receipt this Period

100.00

150132690_4000_PAC

B.

Full Name (Last, First, Middle Initial)

Robert A. Shinstrom

Mailing Address P.O. Box 2845

City

Arlington

State

WA

Zip Code

98223-0650

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employed

Occupation
locksmith

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.8768

Amount of Each Receipt this Period

100.00

150132690_4000_PAC

C.

Full Name (Last, First, Middle Initial)

Robert A. Shinstrom

Mailing Address P.O. Box 2845

City

Arlington

State

WA

Zip Code

98223-0650

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employed

Occupation
locksmith

Receipt For:

2009

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.8774

Amount of Each Receipt this Period

100.00

150132690_4000_PAC

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

8353.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 14

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)

BERMAN FOR CONGRESS

Mailing Address 6380 Wilshire Blvd. #1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 28

Transaction ID: SB23.9312

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

BORN FIGHTING PAC

Mailing Address 607 14th Street, NW, Suite 800
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.9319

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

CLAY JR. FOR CONGRESS

Mailing Address P.O. BOX 4544
SUITE 300

City ST. LOUIS State MO Zip Code 63108

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 01

Transaction ID: SB23.9309

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.9306

Date of Disbursement

06 / 16 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.9308

Date of Disbursement

04 / 13 / 2009

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.9307

Date of Disbursement

06 / 16 / 2009

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Marijuana Policy Project Medical Marijuana PAC or MPP Medical Marijuana PAC

A.

Full Name (Last, First, Middle Initial)

PAC TO THE FUTURE

Mailing Address 607 14th Street, NW
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: SB23.9316

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

SCHAKOWSKY FOR CONGRESS

Mailing Address P.O. BOX 5130

City EVANSTON State IL Zip Code 60204

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 09

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: SB23.9315

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

11500.00